

September 9, 2016
Announcement 1223

Nevada Medicaid Reimburses for Medically Necessary Zika Virus Infection Diagnostic Services

Nevada Medicaid covers all medically necessary diagnostic services related to the detection of a Zika virus infection.

A Center for Medicaid and CHIP Services (CMCS) bulletin dated 06/01/16 states:

States are required to cover all medically necessary diagnostic services related to the detection of a Zika virus infection, including diagnosis of microcephaly and other birth defects without limit to individuals under the age of 21 through the Early Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit.

Extended services for pregnant women are also covered. The CMCS bulletin also states:

States may provide extended Medicaid pregnancy-related services for pregnant women that are greater in amount, duration and scope than is provided to other individuals in the state plan. The extended services must be equal in amount, duration, and scope for all pregnant women in the state plan.

The following CPT codes have been established for the coding and billing of Zika-related procedures. Prior authorization is required for code 76801 if limitation exceeds one ultrasound; otherwise, prior authorization is not required for these codes.

CPT Code	Description
76801	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, first trimester (< 14 weeks 0 days), transabdominal approach; single or first gestation
76802	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, first trimester (< 14 weeks 0 days), transabdominal approach; each additional gestation [List separately in addition to code for primary procedure]
76805	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, after first trimester (> or = 14 weeks 0 days), transabdominal approach; single or first gestation
76810	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, after first trimester (> or = 14 weeks 0 days), transabdominal approach; each additional gestation
76816	Ultrasound, pregnant uterus, real time with image documentation, follow-up (e.g., re-evaluation of fetal size by measuring standard growth parameters and amniotic fluid volume, re-evaluation of organ system(s) suspected or confirmed to be abnormal on a previous scan), transabdominal approach, per fetus)
59000	Amniocentesis; diagnostic
76946	Ultrasonic guidance for amniocentesis, imaging supervision and interpretation
86790	Antibody, virus, not elsewhere specified
86382	Neutralization test, viral